



DIVISION

2008 DEC 11 PM 4:17

Dep &amp; Ref

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Patrycjusz Kosun

Serial No: 10/790,323

Filing Date: February 27, 2004

Title: COMPUTER POINTING DEVICE

Examiner: Regina Liang

Art Unit: 2629

December 4, 2008

Attorney's Docket No.: LAC201RR

## REFUND REQUEST

The Commissioner of Patents &amp; Trademarks

P.O. Box 1450, Alexandria, VA 22313

Sir:

It has been noticed that the fee for independent claims in excess of three has been incorrectly charged to the undersigned deposit account no. 11-0224 in the amount of \$210.00 (a large entity), the fee code 1201, on October 15, and October 16, 2008. Applicant respectfully submits that the amount to be charged for two additional independent claims in excess of three should be \$105.00 for a small entity applicant (the fee code 2201). Applicant encloses copies of the forms PTO/SB/05 and PTO/SB/17, filed with the U.S. Patent and Trademark Office on February 27, 2004 indicating a status of the applicant as a small entity.

Refund of the excess amount of \$210.00 to the deposit account no. 11-0224 is respectfully requested.

Respectfully submitted,  
Patrycjusz Kosun  
By: Horst M. Kasper  
Horst M. Kasper, his attorney  
13 Forest Drive, Warren, NJ 07059  
Tel.(908)757-2839, Reg. No. 28,559  
Attorney's Docket No.: LAC201

%ptl:refund(LAC201RR(December 4, 2008(am

DEC 09 2008

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)412

Complete if Known	
Application Number	
Filing Date	
First Named Inventor	<u>PATRYCJUSZ KOSUN</u>
Examiner Name	
Art Unit	
Attorney Docket No.	<u>LAC 201</u>

## METHOD OF PAYMENT (check all that apply)

 Check    Credit card    Money Order    Other    None
 Deposit Account:

Deposit Account Number	<u>11-0224</u>
Deposit Account Name	<u>HORST KASPER</u>

The Commissioner is authorized to: (check all that apply)

 Charge fee(s) indicated below    Credit any overpayments  
 Charge any additional fee(s) during the pendency of this application  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1001 750	2001 375	Utility filing fee	
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)		(\$) <u>385</u>	

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
73	-20** =	<u>5</u> x <u>9</u> = <u>45</u>	<u>27</u>
Independent Claims	- 3** =		
Multiple Dependent			

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 18	2202 9	Claims in excess of 20
1201 84	2201 42	Independent claims in excess of 3
1203 280	2203 140	Multiple dependent claim, if not paid
1204 84	2204 42	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		(\$) <u>412</u>

\*\* or number previously paid, if greater. For Reissues, see above

## 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 410	2252 205	Extension for reply within second month	
1253 930	2253 465	Extension for reply within third month	
1254 1,450	2254 725	Extension for reply within fourth month	
1255 1,970	2255 985	Extension for reply within fifth month	
1401 320	2401 160	Notice of Appeal	
1402 320	2402 160	Filing a brief in support of an appeal	
1403 280	2403 140	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,300	2453 650	Petition to revive - unintentional	
1501 1,300	2501 650	Utility issue fee (or reissue)	
1502 470	2502 235	Design issue fee	
1503 630	2503 315	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 750	2809 375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 750	2810 375	For each additional invention to be examined (37 CFR 1.129(b))	
1801 750	2801 375	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	
Other fee (specify)			
*Reduced by Basic Filing Fee Paid		SUBTOTAL (3) (\$)	

(Complete if applicable)			
Name (Print/Type)	<u>HORST KASPER</u>	Registration No. (Attorney/Agent)	<u>28,559</u>
Signature		Telephone	<u>(908) 526 1717</u>
		Date	<u>02/27/2004</u>

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-788-9199) and select option 2.



PTO/SB/05 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032  
U.S. Patent and Trademark Office. U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	LAC 201
First Inventor	PATRYCJUSZ KOSUN
Title	COMPUTER POINTING . . .
Express Mail Label No.	

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1.  Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2.  Applicant claims small entity status.  
See 37 CFR 1.27.
3.  Specification [Total Pages 12]  
(preferred arrangement set forth below)
  - Descriptive title of the Invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4.  Drawing(s) (35 U.S.C. 113) [Total Sheets 10]
5. Oath or Declaration [Total Sheets       ]
  - a.  Newly executed (original or copy)
  - b.  Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 18 completed)
    - i.  **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s)  
name in the prior application, see 37 CFR  
1.63(d)(2) and 1.33(b).
6.  Application Data Sheet. See 37 CFR 1.76

7.  CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)
  - a.  Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i.  CD-ROM or CD-R (2 copies); or
    - ii.  Paper
- c.  Statements verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

9.  Assignment Papers (cover sheet & document(s))
10.  37 CFR 3.73(b) Statement  Power of  
(when there is an assignee)  Attorney
11.  English Translation Document (if applicable)
12.  Information Disclosure  Copies of IDS  
Statement (IDS)/PTO-1449 Citations
13.  Preliminary Amendment
14.  Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15.  Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16.  Nonpublication Request under 35 U.S.C. 122  
(b)(2)(B)(i). Applicant must attach form PTO/SB/35  
or its equivalent.
17.  Other: .....

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

Continuation       Divisional       Continuation-in-part (CIP)      of prior application No.: .....

Prior application information: Examiner \_\_\_\_\_ Art Unit: \_\_\_\_\_  
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

Customer Number: \_\_\_\_\_ OR  Correspondence address below

Name	HORST KASPER		
Address	13 FOREST DRIVE		
City	WARREN	State	NY
Country	USA	Telephone	(1908) 526 1717
Name (Print/Type)	HORST KASPER	Registration No. (Attorney/Agent)	28,559
Signature	_____ Date 10/21/2008		

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant(s): Patrycjusz Kosun

Serial No: 10/790,323

Filing Date: February 27, 2004

Title: COMPUTER POINTING DEVICE

Examiner: Regina Liang

Art Unit: 2629

December 4, 2008

Attorney's Docket No.: LAC201T1

**TRANSMITTAL LETTER**

Commissioner for Patents  
P.O. BOX 1450  
Alexandria, Virginia 22313-1450

SIR:

Transmitted herewith for filing is:

REFUND REQUEST dated December 4, 2008

COPY OF FORM PTO-SB-05

COPY OF FORM PTO-SB-17

The Commissioner is hereby authorized to charge any fees under 37 CFR. 1.16, 1.17 and 1.18 or any additional fees which may be required during the entire pendency of the application, or credit any overpayment, to Acct. No.11-0224. A duplicate copy of this sheet is enclosed. If and only if(r) account funds should be insufficient, immediately contact our associate, Lisa Zumwalt, at (703)415-0579, who will pay immediately to avoid deprivation of rights.

< > Please charge my Deposit Account No.11-0224 in the amount of \$ \_\_\_\_\_. A duplicate copy of this sheet is enclosed.

A signature or signatures required for the above recited document(s) is (are) provided herebelow. Such signature(s) also provide(s) ratification for any required signature appearing to be defective in the above recited document(s).

Horst M. Kasper, 13 Forest Drive, Warren, N.J. 07059  
Reg. No. 28,559 Tel.(908) 526-1717

**CERTIFICATE OF MAILING under 37 CFR 1.8:**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Hon. Commissioner for Patents, Alexandria VA. 22313 on DEC 04 2008 Signature:

Date: DEC 04 2008

%LAC201am/

RECEIVED  
CENTRAL FAX CENTER

DEC 09 2008

BRYAN CAVE

**Facsimile Cover**

This facsimile contains information that (a) is or may be LEGALLY PRIVILEGED, PROPRIETARY IN NATURE, OR OTHERWISE PROTECTED BY LAW FROM DISCLOSURE and (b) is intended for the use of the Addressee(s) named herein. If you are not the intended recipient, an addressee, or the person responsible for delivering this to an addressee, you are hereby notified that reading, copying or distributing this facsimile is prohibited. If you have received this facsimile in error, please telephone us immediately and mail the facsimile back to us at the address to the right. Thank you.

Bryan Cave LLP  
One Renaissance Square  
Two North Central Avenue  
Suite 2200  
Phoenix, AZ 85004-4406  
Tel (602) 364-7000  
Fax (602) 364-7070  
[www.bryancave.com](http://www.bryancave.com)

---

Date:	December 9, 2008	Telephone:	(602) 364-7331
From:	Allan W. Watts		
To:	U.S. Patent and Trademark Office	Fax Number:	571-273-8300
		Telephone:	571-272-2007
Matter	0225022	Number of Pages Including Cover: 2	
Message:			

---

**Please see attached Request for Refund re Application No. 12/329,822.**

**To Sender:**

Do you wish to be contacted when fax is sent?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Do you wish to be contacted at your home/office if fax cannot be sent within one hour? Tel:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

---

If all pages are not received, please call (602) 364-7366.

630978.1



cc  
JAW/B

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Patrycjusz Kosuni  
Serial No: 10/790,323 10/790,323 Art Unit:  
Filing Date: February 27, 2004  
Title: COMPUTER POINTING DEVICE  
Examiner: Mahmoud Fatahi Yar

December 6, 2007

Attorney's docket No.: LAC201T4

TRANSMITTAL LETTER

Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia, 22313-1450

SIR:

Transmitted herewith for filing is:

<X> AMENDMENT dated December 6, 2007

<X> ABSTRACT OF DISCLOSURE

<X> FORM PTO-2038

(X) The applicant hereby petitions the Commissioner of Patents and Trademarks to extend the time for response to any Office Action outstanding in the above captioned matter as necessary to avoid abandonment of the application. Please charge my deposit account No.11-0224 in the amount required to cover the cost of the extension. Any deficiency or overpayment should be charged or credited to the above account.

(X) The Commissioner is hereby authorized to charge any fees under 37 C.F.R. 1.16, and 1.17, after a mailing of a Notice of Allowance under 37 CFR 1.18 or any additional fees which may be required during the entire pendency of the application, or credit any overpayment, to Acct. No.11-0224. A duplicate copy of this sheet is enclosed. If and only if account funds should be insufficient, immediately contact our associate, Lisa Zumwalt, at (703)415-0579, who will pay immediately to avoid deprivation of rights.

( ) Please charge my Deposit Account No.11-0224 in the amount of \$ \_\_\_\_\_. A duplicate copy of this sheet is enclosed.

A signature or signatures required for the above recited document(s) is (are) provided herebelow. Such signature(s) also provide(s) ratification for any required signature appearing to be defective in the above recited document(s).

Adjustment date: 12/16/2008 SDIRETA1  
12/11/2007 AAHMADI 00000002 10790232  
01 FC:2252 -230.00 OP

*Horst Kasper*  
Horst Kasper, 13 Forest Drive, Warren, N.J.07059  
Reg. No. 28,559 Tel.(908)526-1717

**MAILING CERTIFICATION:** I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to Commissioner for Patent, P.O. Box 1450, Alexandria, Virginia 22313-1450, on DEC 06 2007

Signature: *Holay* Date: DEC 06 2007 Reg. No. 28,559 Tel.(908)526-1717  
01 FC:2252 230.00 OP

\*%PciI:d:trans1(LAC201T4(December 6, 2007(am

Document code: WFEE

United States Patent and Trademark Office  
Sales Receipt for Accounting Date: 10/15/2008

JDOBBS SALE #00000003 Mailroom Dt: 12/10/2007 110224 10790323  
01 FC:1201 210.00 DA

Adjustment date: 12/16/2008 SDIRETA1  
10715/2008 JDOBBS 00000003 110224 10790323  
01 FC:1201 210.00 CR

12/16/2008 SDIRETA1 00000002 110224 10790323  
01 FC:2201 210.00 DA

Document code: WFEE

United States Patent and Trademark Office  
Sales Receipt for Accounting Date: 10/16/2008

JDOBBS SALE #00000001 Mailroom Dt: 12/13/2007 110224 10790323  
01 FC:1201 210.00 DA

Adjustment date: 12/16/2008 SDIRETA1  
10/16/2008 JDOBBS 00000001 110224 10790323  
01 FC:1201 210.00 CR